PART B - FEE(S) TRANSMITTAL

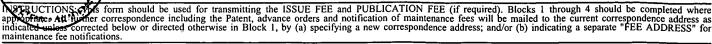
Somplete and send this form, together with applicable fee(s), to: Mail

MAY 1 4 2004

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450





CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

02/10/2004

Roy A. Ekstrand Mattel, Inc. M1 1518 333 Continental Blvd El Segundo, CA 90245

A Publication Fee

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Roy A	LEKSTRAND	(Depositor's name
\\ \J	9Elut	(Signature
- Y	May 10, 2004	(Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/611,381	06/30/2003	Cassidy Park	15102(1)	1514	

TITLE OF INVENTION: DOLL HAVING CHANGEABLE EYES AND REMOVABLE ALTERNATIVE FACE

APPLN. TYPE	SMALL ENTITY	ISSUE FE	E PI	JBLICATION FEE	TOTAL FEE(S) D	DUE DATE DU	UE
nonprovisional	NO	\$1330		\$300	\$1630	05/10/20)04
EXAMINER		ART UNI	T CI	ASS-SUBCLASS			
ABDELWA	ABDELWAHED, ALI F 371			446-391000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. □ "Fee Address" indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Unless been previously submitte (A) NAME OF ASSIGN		low, no assignee da submitted under sep	ata will appear on the parate cover. Complet RESIDENCE: (CIT	e patent. Inclusion of this form is I Y and STATE OR	NOT a substitute for filin	appropriate when an assig g an assignment.	gnment has
	EL, INC.	2.7.20		•	DO, CA		
a. The following fee(s) are	assignee category or catego		Payment of Fee(s):	u individual	corporation or other p	private group entity $\bigcup g$	government
Issue Fee		☐ A check in the amount of the fee(s) is enclosed.					

Payment by credit card. Form PTO-2038 is attached.

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)	(Date)
11/9/	5-10-04
- 1, 4 2 W	0 10 0 1
NOTE; The Usue Fee and Publication Fee (if require	d) will not be accepted from anyon

other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents. Alexandria, Virginia 22313-1450. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

05/17/2004 WABRHAM2 00000198 132185 10611381

1330.00 DA 01 FC:1501 300.00 DA 02 FC:1504 30.00 DA 03 FC:8001

The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-218-5 (enclose an extra copy of this form).

Advance Order - # of Copies TEN (10)